THE ROLE OF VITRECTOMY IN THE MANAGEMENT OF POSTOPERATIVE ENDOPHTHALMITIS: 12 YEARS-OLD OUTCOMES

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Purpose: To analyze the predictors of visual outcome and role of pars plana vitrectomy as a treatment in patients with postoperative endophthalmitis (PE).

Methods: This is a single-center, retrospective case series study. All patients with PE were included. Best visual acuity after treatment and variation of visual acuity (VVA) were the main outcomes.

Results: Over 12 years, 93 patients were included. Sixty-seven percent of patients underwent complete vitrectomy after being diagnosed with PE. This group of patients had more comorbidities, a worse VA after treatment and a lower VVA in comparison with the group not submitted to vitrectomy. Good visual outcome after treatment (≤ 0.3 LogMAR) was reached in 29.5% of patients. A higher age, worse VA at the time of diagnosis, need for vitrectomy and longer waiting time until vitrectomy were significantly associated with worse visual outcome. Longer waiting time before the onset of symptoms, worse VA at the time of the diagnosis and the need for vitrectomy were significantly associated with shorter VVA.

Conclusion: The process of deciding whether to perform vitrectomy should take into consideration each patient’s characteristics and overall clinical course. Moreover, when the decision to perform vitrectomy is made, its delay in surgery results in worse visual prognosis.